SUPPLEMENT
TO THE
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SPECIAL NOTICE TO MEMBERS

Every Member is requested to preserve this "Supplement," which contains matters specially referred to Divisions, until the subjects have been discussed by the Division to which he or she belongs.

MATTERS REFERRED TO DIVISIONS

British Medical Association

ANNUAL REPRESENTATIVE MEETING, LONDON, 1935

The Annual Representative Meeting of the British Medical Association will be held in the Great Hall, British Medical Association House, Tavistock Square, London, W.C.1, on Friday, Saturday, Monday, and Tuesday, July 19th, 20th, 22nd, and 23rd.

RESOLUTIONS BY DIVISIONS AND BRANCHES FOR THE REPRESENTATIVE BODY, TOGETHER WITH RELEVANT RECOMMENDATIONS OF COUNCIL

NOTE: *This includes only the Recommendations of Council contained in the Annual Report to which amendments have been sent in; also any Motions from Divisions and Branches of which two months' notice must be given.*

Relationship of Association to Agency for Introduction of Patients

Motion by North Glamorgan and Brecknock: That (with reference to para. 19 of Annual Report of Council) the practice of the British Medical Bureau in relation to advertisements in the lay press and to the payment by practitioners to the Bureau of a proportion of fees received from patients is to be regretted.

Motion by Bristol: That in the opinion of the Representative Body it shall be regarded as unethical behaviour on the part of any member who pays or agrees to pay a commission for the introduction of a patient.

B.M.A. Article 17

Motion by Leinster: That (with reference to para. 42 of the Annual Report of Council) Article 17 of the Association be amended by insertion after the word "Division," in the third and fourth lines, of the words "corporate Branch or corporate Group."

Retired Practitioners and Membership of the Association

Motion by Tunbridge Wells: That the Council be instructed to explore the possibility of permitting medical practitioners retired from practice to remain members of the Association at a subscription lower than the £2 2s. now obtaining.

The Medical Services in Llanelly and District

Motion by Swansea: That (with reference to paras. 77–80 of the Annual Report of Council) the Representative Body, while recognizing the work which has been done by the Council in regard to the dispute at Llanelly, regrets that so far no satisfactory settlement has been secured, and urges the Council to take the most active steps possible to bring the issue to a conclusion satisfactory to the profession.

Whole-time Medico-Political Secretary

Motion by Swansea: That the Council be asked to take into consideration the appointment of a Secretary whose whole time shall be devoted to dealing with medico-political issues.

Workmen's Compensation and Accident Cases

Motion by North Glamorgan and Brecknock: That (with reference to para. 84 of Annual Report of Council) a fee of *not less than* £1 1s. should be paid for examination and report on workmen's compensation and accident cases.

RELATION OF THE PRIVATE PRACTITIONER TO THE TREATMENT OF MENTAL DISABILITY

Motion by BRIGHTON: That (with reference to para. 86 of the Annual Report of Council) whether or no whole-time salaried medical officers appointed to mental hospitals by a local authority should be permitted to engage in private consultant practice should depend, not on the local authority having adopted the scheme on staffing of their mental hospitals outlined in paragraph 45 of the Memorandum on Treatment of Mental Disability (1932), but on whether or no there is available in the area of that authority one or more private medical practitioners who fulfil one or more of the three criteria adopted by the Association as determining the status of a consultant in psychiatry. When there is such a private practitioner or practitioners available, then whole-time salaried medical officers should not engage in private practice; therefore Section 86 of the Annual Report of Council be referred back for further consideration.

TREATMENT UPON CONTRACT TERMS OF PERSONS WITH INCOME ABOVE £250 PER ANNUM

Motion by WANDSWORTH: That (with reference to para. 89 of the Annual Report of Council) the following words be added to subpara. 1 (*c*) of Minute 109 of the Annual Representative Meeting, 1920:

"except with approval of the local profession."

Motion by SOUTH-WEST ESSEX: That (with reference to para. 89 of the Annual Report of Council) the following words be added to subpara. 1 (*c*) of Minute 109 of the Annual Representative Meeting, 1920:

"unless such terms have been agreed to by the profession in the area."

Minute 109 of A.R.M., 1920, reads as follows:

Minute 109.—Resolved: That the Representative Body adopt the following principles as essential to the formation of any schemes for the provision of medical attendance and treatment of uninsured persons:

(1) That, in general, in considering the necessity for obtaining the approval of the Council for schemes for the treatment of uninsured persons upon contract terms, the following principles and conditions must be adhered to:

(*a*) Free choice of doctor by patient and of patient by doctor;

(*b*) Remuneration to be not less than that which is deemed by the Council to be equivalent to that paid in respect of insured persons;

(*c*) Persons with a total income from all sources of £250 per annum or upwards, or the dependants of any such person, not to be treated under contract terms at all.

(2) That the Representative Body realizes that the conditions in certain areas will not allow of the above terms being obtained, and that in these circumstances the approval of the Council may be given provisionally to a scheme involving a less payment when the local profession can show that the economic conditions in the area demand it.

(3) That one of the conditions necessary for the approval of schemes containing lower rates of payment shall be the inclusion among the rules, in a prominent position, of a statement that approval by the Association has been given to the rates only because of special economic conditions.

MEDICAL PRACTITIONERS AND MEMBERSHIP OF LOCAL AUTHORITIES

Motion by TUNBRIDGE WELLS: That the Representative Body, believing it to be of the utmost importance that medical practitioners should seek election to local authorities, instructs the Council to consider and report on the desirability of establishing a fund for the assistance of approved candidates for election to local authorities.

"ONE-PORTAL" ENTRY TO MEDICAL PROFESSION

Motion by WARRINGTON: That the Representative Body reaffirms the early policy of the Association regarding "one-portal" entry to the profession, and instructs the Council to consider means of giving practical effect thereto.

WHOLE-TIME CONSULTANTS AND PRIVATE PRACTICE

Motion by COUNCIL (para. 119 of Annual Report of Council): That domiciliary attendance by a consultant should, in the best interests of the public and of medicine, be provided by a consultant in private practice and not by a whole-time medical officer, except where there is no such consultant available for the purpose and willing to undertake the domiciliary work on suitable terms. The adoption of this resolution shall not affect consultations with a public health medical officer in cases of notifiable diseases.

Motion by NORTH GLAMORGAN and BRECKNOCK: That it should be clearly understood that the fee payable to the consultant must not come out of the common pool.

NATIONAL HEALTH INSURANCE MEDICAL RECORDS

Motion by TUNBRIDGE WELLS: That the Representative Body instructs the Council to press for the abolition of the compulsory statistical compilation of national health insurance cards, and to secure that such cards be used primarily for clinical notes.

TREATMENT AT VOLUNTARY HOSPITALS OF PATIENTS FOR WHOM LOCAL AUTHORITY ACCEPTS FINANCIAL RESPONSIBILITY

Motion by BRIGHTON: That Minute 135, A.R.M., 1933, be rescinded and the following substituted therefor:

That where a voluntary hospital gives treatment, whether in-patient or out-patient, for which the local authority accepts financial responsibility, the members of the visiting medical staff of the voluntary hospital should be remunerated on the following basis:

The local authority should pay to the voluntary hospital for general hospital service a maintenance cost of each patient which should not be less than the sum representing the cost of maintenance in the local authority's own hospital for similar service, plus an addition of one-fourth in respect of medical services; and of the total sum so received, 20 per cent. should be allocated by the voluntary hospital to the visiting medical staff. This should not apply to those cases where specific schedules of remuneration are laid down in the policy of the Association for special services. In compiling the cost of maintenance in the local authority's hospital no payment for medical services should be included.

[Minute 135 of A.R.M., 1933, reads as follows:

Minute 135.—Resolved: That where a voluntary hospital gives in-patient treatment to patients for whom the local authority accepts financial responsibility, the members of the visiting medical staff of the voluntary hospital should be remunerated on the following basis:

The local authority should pay to the hospital for general hospital service a maintenance cost of each patient which should not be less than the sum representing the cost of maintenance in the local authority's own hospital for similar service, plus an addition of one-fourth in respect of medical services, and of the total sum so received 20 per cent. should be allocated by the voluntary hospital to the visiting medical staff. This should not apply to those cases where specific schedules of remuneration are laid down in the policy of the Association for special services. In computing the cost of maintenance in the local authority's hospital no payment for medical services should be included.]

MEMBERS OF COUNCIL ATTENDING CONFERENCES

Motion by BIRMINGHAM CENTRAL: That no member of the Council of the Association invited to attend a public conference (that is, a conference not of a specifically medical character to which the Press is admitted or given a report) by reason of his position as a member of the Council shall express views which are not contained in the policy of the Association, and the fact that this had not been adhered to in the past is deprecated.

THE GENERAL PRACTITIONER AND ANTE-NATAL SCHEMES

The *Supplement* of April 7th, 1934, contained on page 137 a survey of ante-natal schemes which involve the employment of general practitioners. Three more similar schemes are summarized below, together with a reference to the amendments made in the Cheshire scheme.

HARROW

The scheme applies to uninsured and insured women who are referred by midwives to any of the general practitioners who have agreed to participate in the scheme. Examinations are expected to be made about the 16th, 32nd, and 36th weeks, and any necessary instructions are given by the doctor to the midwife. The practitioner enters the results of his examinations on a prescribed form, which is returned to the medical officer of health not later than two months after the date of the confinement. A fee of 10s. is paid for the first examination of each uninsured woman, and 5s. for each subsequent examination. For each report on an insured woman 5s. is paid. Payment is made quarterly, in accordance with the number of forms returned by the practitioner. The scheme also provides for the payment of a sum not exceeding 10s. to a midwife who loses a case in consequence of the doctor's recommendation that the confinement should take place in hospital.

WARWICKSHIRE

The facilities are available to uninsured women who are referred by a midwife to one of the general practitioners who have intimated their willingness to participate in the scheme. The midwife notifies the selected doctor at or about the 16th week of pregnancy, and the doctor then makes a general and obstetrical examination, either at the woman's home or at his surgery. He gives a report and instructions to the midwife, and partially completes the report which is to be sent to the M.O.H. after the confinement. A similar procedure is followed at or about the 32nd week of pregnancy, when a full obstetrical examination is made. The M.O.H. notifies the doctor when the birth has occurred, and the doctor is then required to complete his report and return it to the M.O.H. within a month of the confinement. The doctor's fee is 5s. for each examination and completed report, and mileage of 6d. a mile each way is paid for any distance over two miles from the doctor's surgery. The fee is payable only if the report is returned to the M.O.H. within the prescribed time limit. Applications for a second opinion and for bacteriological and *x*-ray examinations are made to the M.O.H. In order to encourage ante-natal care for all women, midwives are advised to recommend insured women to apply to their insurance doctors for the ante-natal supervision to which they are entitled under the National Health Insurance Acts.

RADNORSHIRE

This scheme was outlined in a letter from the county M.O.H. in the *Supplement* of April 14th, 1934 (p. 157). It applies to necessitous uninsured women who are referred by midwives to their doctors. An examination is made between the 28th and 30th weeks of pregnancy, and the fee is 5s. for each examination, plus mileage of 6d. a mile each way from the doctor's surgery.

CHESHIRE

As was stated in the *Supplement* of September 8th, 1934 (p. 163), the county council scheme has been extended to doctors' cases, provided that the women are the uninsured wives of insured men or of a similar social status. Another welcome amendment to the scheme has been made with effect from April 1st, 1935. This is the payment of a fee of 2s. 6d. for each report on an insured woman, which practitioners were previously required to furnish without fee.

THE INSURANCE MEDICAL SERVICE WEEK BY WEEK

Fees for Specialist Services

When a practitioner is of opinion that a service which he proposes to render to one of his insured patients is outside the range of his contract with the Insurance Committee, he is required to send in a statement on a prescribed form—G.P. 45—within two days after the date on which the treatment is given. (It is hoped that in the consolidated regulations shortly to be made this period may be extended to seven days, but this is immaterial for the purposes of the present note.) It is clearly necessary for the protection of the insured person from irregular fee charging that such a contention should be subjected to proper examination, and the regulations accordingly provide that the question should be referred to the Local Medical Committee in the first instance. There are involved here a matter of form (in a very real sense) and a matter of substance. Paragraph 10 (2) of the first schedule to the regulations makes provision as follows:

"... a practitioner is not permitted to demand or accept any fee or other remuneration in respect of any treatment given by him to a patient which is alleged to be not within the scope of the practitioner's obligations under these terms of service unless, within two days after the date on which the treatment is given, he has furnished the Committee, on a form to be supplied by them for the purpose, with such particulars relating to the service rendered as they may require. Provided that, if it be decided under Article 43 of the regulations that such treatment fell within the scope of the practitioner's obligations under these terms of service, the Committee may recover any fee paid by the patient by deducting the same from the practitioner's remuneration or otherwise, and shall repay to the patient the amount of such fee."

Article 43 (1) of the regulations embodies a specific requirement that if a question arises, either in the course of an investigation by the Medical Service Subcommittee or otherwise, as to whether an operation or other service which a practitioner has advised for, or rendered to, a patient was within the scope of the practitioner's obligations under the terms of service, that question shall be referred to the Local Medical Committee.

This requirement is definite and unqualified. There is, as shown, a way in which these questions are to be raised, but the submission of the question to the Local Medical Committee is not made in any way dependent upon the requirement that Form G.P. 45 shall have been rendered to the Committee. It follows from this that where it has come under the notice of an Insurance Committee that a practitioner has charged a fee for a service which he contends is a specialist service not within his contract, and the Committee has not received from the practitioner Form G.P. 45, the form must be duly completed and the matter must be referred to the Local Medical Committee in the first instance. If the decision following the submission of the case to the Local Medical Committee is that the service is outside the practitioner's contract, then he is clearly entitled to his fee from the insured person, and it may be surmised that the Committee would merely remind the practitioner for his future guidance of the requirement in the terms of service as to the submission of Form G.P. 45.

It is not of course suggested that, if the Committee think fit to have an investigation by the Medical Service Subcommittee as to the circumstances in which the practitioner failed to send in Form G.P. 45, and has thereby committed a breach of the terms of service, such a procedure is not perfectly regular. But if the service is found after the prescribed investigation under Article 43 (1) to have been a specialist service outside the practitioner's contract, there is at least a strong presumption that the omission to send in Form G.P. 45 was a pure oversight not calling for disciplinary action. If, on the other hand, the service is found to be one which properly fell within

the practitioner's obligations, and especially if there could be no real doubt in the doctor's mind about the matter, it could not be suggested that there would be anything unfair in proceedings before the Medical Service Subcommittee in respect of the breach of the regulations involved by the practitioner's failure to send in Form G.P. 45. The question of form in that case may well be found to be a question of substance.

It is important that insured persons should be protected against improper fee charging; it is equally important that a practitioner should be protected from an investigation by the Medical Service Subcommittee to the exclusion of an inquiry by his professional brethren into what is, at any rate in the first instance, an entirely professional question.

Meetings of Branches and Divisions

DORSET AND WEST HANTS BRANCH: WEST DORSET DIVISION

A meeting of the West Dorset Division was held at the Weymouth and District Hospital on March 22nd, when cases and pathological specimens were shown by the honorary medical staff. Dr. MARIE STOPES then gave a lecture on "The History and Technique of Contraception," in which she traced the evolution of public opinion towards contraception, and how scientific progress had been hindered by prejudice and the questionable practices of manufacturers. In her opinion there was no perfect contraceptive, though if modern methods were intelligently used a high percentage of success was assured. Unfortunately there were still methods in use which were by no means certain and were a positive danger to use. So far as her clinics were concerned the procedure recommended was that best suited to the individual case. The lecturer emphasized that contraception should only be considered to be justifiable if employed for medical reasons, or if the standard of the race as a whole could be improved by the proper spacing of families. An eager discussion followed, in which Dr. H. M. STEPHENSON, Dr. F. W. SUMNER, Dr. FORBES KINNEAR, Dr. R. H. BARNES, Dr. A. E. STAFFURTH, and Dr. F. H. RODIER HEATH took part.

EAST YORKSHIRE BRANCH

A meeting of the East Yorkshire Branch was held at Hull on March 22nd, when the president, Dr. GAVIN S. BROWN, was in the chair.

Dr. N. GEBBIE opened a discussion on "The General Practitioner and the Public Health Service." Dr. Gebbie dealt with the evolution of the public health service since the passing of the first Public Health Act of 1875. He showed how, in the early days, both between individual practitioners and between the public health service on the one hand and those engaged in private practice on the other, there existed not amity but actual antagonism. He ascribed the reason for the antagonism between practitioners and the public health services as due, first, to lack of training of the medical student in public health; secondly, to the distaste of some for statistical requirements; and, thirdly, to the encroachment of clinics, especially the maternity and child welfare and the school clinics, on the private practitioner's purse. Dr. Gebbie urged that the only method of countering this last was an extension of the national health insurance service to dependants. He also pleaded for a fuller representation of the medical profession on the various public health and parliamentary committees, recognizing the difficulty of general practitioners devoting the necessary time to these duties.

Dr. MORTON STEWART, stating the case for general practitioners, admitted that he and others had frequently received unstinted and valuable help from the public health service. There were two types of practice, he said, preventive and curative, and whereas the domain of the public health service should be preventive, he was afraid that curative medicine in various departments was practised. In the specialist clinics, such as those dealing with mental illness, fever, ear, nose, and throat conditions, etc., this was not only understandable, but desirable, but the practice, he suggested, extended to the school and similar clinics. Dr. Stewart's main grounds of complaint were that in the routine school examinations children were referred not to their own doctors, but to the school clinics or to the hospitals, and he asked that teachers might be instructed to alter this. The maternity and child welfare clinics were a definite encroachment on the private practitioner's province. The appointment of a gynaecologist would be welcomed so long as he was not in general practice, and was able to give both ante-natal and post-natal advice and help in the patient's home. With regard to the infants' clinic, Dr. Stewart regretted that patients were never referred to their own doctor, and suggested that fuller instructions be given, not verbally, but in written form to the mothers. Health visitors were over-zealous, and attracted patients to the clinics on occasion, even though their private doctor was in attendance. Finally, he regretted that diphtheria inoculation patients, many of whom were in fortunate financial circumstances, were dealt with by the public health department and not by their own doctors.

In the open discussion which followed Dr. JOHN MORRISON, Dr. M. JACOBS, Dr. T. STIRLING EDDIE, Dr. ELIZABETH J. FINDLAY, Dr. MILLIGAN, Mr. SIMPSON, Dr. A. GILLESPIE, Dr. D. A. CADMAN, and Dr. L. LAVINE took part.

HERTFORDSHIRE BRANCH: BARNET DIVISION

A meeting of the Barnet Division was held at Hadley Wood Golf Club on April 9th, when, following an excellent dinner, there was an address by Dr. ROBERT FORBES (Deputy Medical Secretary) on "The Future of Medical Practice." Dr. Forbes spoke on the changes which had been effected in private practice since the introduction of the National Health Insurance Acts, on the changes taking place as a result of the Local Government Act, 1929, and on the prospects of the inclusion of consultants within the realms of medical politics. The address was warmly received, and gave rise to considerable discussion, to which most of the members contributed. The meeting, which terminated at an advanced hour of the evening, was voted a great success.

HERTFORDSHIRE BRANCH: EAST HERTFORDSHIRE DIVISION

A meeting of the East Hertfordshire Division was held at Bishop's Stortford on April 3rd, when Mr. C. H. MEDLOCK was in the chair.

The title of Lord HORDER's address was "Misleading Symptoms and Signs." The lecturer announced at the beginning that he proposed to confine his remarks to pain, and he proceeded to deal with the significance of pain in the head, thorax, abdomen, and limbs. A brief discussion followed, and the meeting terminated with a hearty vote of thanks to Lord Horder for an interesting and instructive evening.

SOUTH WALES AND MONMOUTHSHIRE BRANCH: SOUTH-WEST WALES DIVISION

A meeting of the South-West Wales Division was held on March 27th, when a cinematograph film entitled "The Science and Art of Obstetrics" was shown by the courtesy of Petrolagar Laboratories Ltd. The subject was dealt with in three separate films: the first dealt with the behaviour of the uterus throughout, the second with the technique of normal delivery, while the third film showed the third stage and repair of perineum. After a discussion a vote of thanks, proposed by Dr. ABRAHAM THOMAS, seconded by Dr. T. R. DAVIES, was accorded Petrolagar Laboratories.

SUSSEX BRANCH: WEST SUSSEX DIVISION

A meeting of the West Sussex Division was held at Worthing on March 20th, when Dr. E. C. BRADFORD was in the chair.

Professor MILLAIS CULPIN gave an interesting address on "The Examination of the Nervous Patient." At the close an excellent dinner was served, after which the lecturer was asked many questions, and there was a lively discussion.

UNITED PROVINCES BRANCH

A clinical meeting of the United Provinces Branch was held at Lucknow on February 22nd, when Captain K. S. NIGAM was in the chair.

Dr. D. E. ANKLESARIA (Bombay) read an interesting paper on "The Pregnancy Test of Aschheim-Zondek." Dr. Anklesaria described his technique of a test performed on mature isolated rabbits, and demonstrated the ovaries of an animal which had been injected the previous day with the urine of a pregnant woman. The speaker discussed the utility of the test in the diagnosis of early pregnancy, hydatidiform mole, and chorion epithelioma. A brief discussion followed, in which Dr. ETHEL A. DOUGLAS and Dr. M. A. HAMEED took part.

Dr. GRACE STAPLETON read notes of two interesting cases of full-term ectopic gestation which she had seen in her practice recently, while Colonel G. T. BURKE, I.M.S., showed cases of pericarditis with effusion, probably of rheumatic

origin, and of chronic lead poisoning with thickened arteries and some vague abdominal symptoms. Dr. JAISWAL, on behalf of Professor Acharya, demonstrated a case of proptosis of the left eye, the cause of which remained obscure, in a child aged about 10 years.

On the following day members of the Branch were shown a film on "Blood Transfusion," which was much appreciated.

British Medical Association

CURRENT NOTES

Treasurer's Golf Cup Competition

Owing to the fact that the Annual Meeting of the Association is to be held in Melbourne this year there can be no competition for the Treasurer's Golf Cup. This does not, however, prevent Divisions from holding competitions in their own area, the prizes being provided from the sums charged as entrance fees.

Secretaries' Conference and Dinner

It has been decided to hold the Annual Conference of Honorary Secretaries of Divisions and Branches at B.M.A. House, Tavistock Square, London, W.C., on the afternoon of Thursday, July 18th, at 2.30 o'clock, with the Secretaries' Dinner the same evening at 7 for 7.30. Further details will be forwarded later from the Head Office to those concerned.

BOOKS ADDED TO THE LIBRARY

The following books were added to the library of the British Medical Association during April, 1935:

Abbatucci, S., *et al.*: Les Ordonnances du Médecin Praticien. Third edition. 1934.
Aykroyd, W. R.: Three Philosophers (Lavoisier, Priestley, and Cavendish). 1935.
Babinski, J.: Oeuvre Scientifique. 1934.
Bose, J. P.: Handbook on Diabetes Mellitus. Second edition. 1934.
Charles, E.: Sexual Impulse. 1935.
Chiray, M., and Chéne, P.: Précis de Sémiologie Médicale Appliquée. 1934.
Clinch, H. G., and Bannington, B. G.: Unfit Houses. 1935.
Dominguez, F.: Carlos J. Finlay. 1935.
Guy, G., and Linklater, G. J. I.: Hygiene for Nurses. Third edition. 1935.
Ikin, A. G.: Religion and Psychotherapy. 1935.
Jarcho, J.: Postures and Practices during Labour among Primitive Peoples. 1934.
Kidd, M.: Ideal Motherhood. 1934.
Krause, A. C.: Biochemistry of the Eye. 1934.
Macmurchy, H.: Sterilization? Birth Control? 1934.
Pal, R. K., and Chakravarti, A.: A Handbook of Modern Physiology. 1934.
Piéry, M.: Traité de Climatologie. Three volumes. 1934.
Reeve, A. F.: Hospital Economies. 1934.
St. Mark's Hospital, London, Centenary Volume, 1835–1935. 1935.
Sergent, E., *et al.*: L'Exploration Clinique Médicale. 1934.
Tinkler, C. K., and Masters, H.: Applied Chemistry. Vol. i. Third edition. 1935.
Transactions of the Ninth Congress of the Far Eastern Association of Tropical Medicine. Vols. i and ii. 1935.
Vallery-Radot, P., and Hamburger, J.: Les Migraines. 1935.
Worcester, A.: Sex Hygiene. 1934.
Wrench, G. T.: Healthy Wedded Life. Fourth edition. 1935.

DANGEROUS DRUGS: WITHDRAWAL OF AUTHORITY

The Home Secretary gives notice that he has withdrawn from John Alex. Ross, M.B., Ch.B., formerly of Fulham, S.W., and now believed to be residing in Aberdeen, the authority granted by the regulations made under the Dangerous Drugs Act, 1920, to medical practitioners to be in possession of and to supply raw opium, coca leaves, and Indian hemp, and the drugs and preparations to which Part III of the Act applies, and has also directed that it shall not be lawful for Dr. Ross to give prescriptions for the purposes of the Dangerous Drugs (Consolidation) Regulations, 1928. Any person supplying Dr. Ross with raw opium, coca leaves, or Indian hemp, or any of the drugs or preparations to which Part III of the Act applies, or supplying the drugs on a prescription signed by him will be committing an offence against the Acts.

Naval and Military Appointments

ROYAL NAVAL MEDICAL SERVICE

Surgeon Rear-Admiral W. W. Keir, C.M.G., has been placed on the retired list at his own request.

Surgeon Rear-Admiral P. Pick, O.B.E., to the *Pembroke*, for Royal Naval Hospital, Chatham, and as Medical Officer in Charge.

Surgeon Captain F. J. Gowans to be Surgeon Rear-Admiral.

Surgeon Commanders A. de B. Joyce, H. H. Babington, and G. H. Hayes to the *President*, for Medical Department, Admiralty; M. B. Devane to the *Keith*; W. H. Murray to the *President*, for course.

Surgeon Lieutenant Commanders E. B. Pollard to the *Galatea*, May 15th, and to the *Pembroke*, for Royal Marine Infirmary, Deal, June 13th; J. J. Keevil to the *Victory*, for Royal Naval Barracks, Portsmouth; D. C. Drake to the *Drake*, for Plymouth Hospital; J. L. Malone to the *Arethusa*.

The short service engagement of Surgeon Lieutenant W. S. Davidson has terminated.

Surgeon Lieutenants E. James to the *Milford*, on recommissioning; W. J. M. Sadler to the *President*, for course; D. G. Yendoll to the *Pembroke*, for Royal Naval Barracks.

ROYAL NAVAL VOLUNTEER RESERVE

Surgeon Commander W. F. W. Betenson to the *St. Vincent*.

Surgeon Lieutenant Commander R. R. B. Roberts to the *Victory*.

Surgeon Lieutenant H. L. Hoffman to be Surgeon Lieutenant Commander.

Surgeon Lieutenants G. F. S. Parker to the *Iron Duke*; R. D. Jenkins to the *Victory*; W. T. R. Chapman to the *Durban*; C. Seeley to the *Curacoa*; G. H. Sellers to the *Tiverton*; J. N. Matthews to the *Nelson*.

A. I. L. Maitland has entered as Probationary Surgeon Lieutenant, and is attached to List 1 of Clyde Division (headquarters).

Probationary Surgeon Sublieutenants K. E. O. Ringdahl to the *Renown*; P. H. K. Gray to the *Rodney*.

ARMY MEDICAL SERVICES

Colonel H. H. J. Fawcett, D.S.O., half pay, late R.A.M.C., has retired on retired pay.

ROYAL ARMY MEDICAL CORPS

Lieutenants (on probation) R. S. Vine, J. E. Jameson, R. H. Wheeler, and J. J. C. Rainsbury have been confirmed in their rank.

B. d'E. Barclay to be Lieutenant (on probation).

REGULAR ARMY RESERVE OF OFFICERS

ROYAL ARMY MEDICAL CORPS

Lieut.-Col. P. Dwyer, M.C., having attained the age limit of liability to recall, ceases to belong to the Reserve of Officers.

ROYAL AIR FORCE MEDICAL SERVICE

Flight Lieutenant J. S. Carslaw has been granted a permanent commission in this rank.

Flight Lieutenants R. E. Alderson to Central Medical Establishment, London; R. E. W. Fisher to Aircraft Depot, Karachi, India; O. S. M. Williams to Air Armament School, Eastchurch.

TERRITORIAL ARMY

ROYAL ARMY MEDICAL CORPS

Captain F. R. Curtis has resigned his commission.

Lieutenants W. R. Nash and E. F. S. Morrison to be Captains.

To be Lieutenants: H. W. E. Jones; R. W. D. Turner, late Cadet Sergeant Epsom College Contingent, Junior Division, O.T.C.; B. L. McQuillan, late Officer Cadet, Queen's University Contingent, Belfast, Senior Division, O.T.C.; R. D. Forsyth, late Officer Cadet, Glasgow University Contingent, Senior Division, O.T.C.; K. G. W. Saunders, late Officer Cadet, University of London Contingent, Medical Unit, Senior Division, O.T.C.; G. O. Gauld, late Officer Cadet, Cambridge University Contingent, Senior Division, O.T.C.

TERRITORIAL ARMY RESERVE OF OFFICERS: ROYAL ARMY MEDICAL CORPS

Captain G. McLoughlin, from active list, to be Captain.

COLONIAL MEDICAL SERVICES

The following appointments are announced: N. J. Dias, M.R.C.S., L.R.C.P., Government Medical Officer, British Guiana; T. A. Redhead, M.B., Ch.B., and J. E. Ross, M.D., M.S., Medical Officers, Grenada; J. R. Forde, M.B., B.Ch., Senior Medical Officer, Gold Coast; J. H. Pottinger, M.B., Ch.B., D.P.H., Senior Medical Officer, Palestine; A. M. W. Rae, M.D., Ch.B., Senior Medical Officer, Gambia; C. F. Deutrom, L.R.C.P., L.R.C.S., Superintendent and Quarantine Medical Officer, Mandapam, Ceylon; S. T. Gunasekera, L.R.C.P., M.R.C.S., Deputy Director of Medical and Sanitary Services, Ceylon.

Correspondence

VOLUNTARY HOSPITALS (PAYING PATIENTS) BILL

SIR,—In your issue of May 4th Dr. Peter Macdonald, chairman of the Hospitals Committee of the British Medical Association, in replying to a communication from Dr. A. Keith Gibson, states that the present Bill "is strictly limited" to obviating "the necessity for individual hospitals promoting separate individual Bills" in order to provide beds for "paying patients"—that is, private patients, as our profession understands the term (although the judges might interpret these words to cover contributory patients as well).

This is not a fact. It is quite immaterial what this or that person thinks now that a Bill means: what will matter will be the interpretation put on the Bill in the courts when it has become an Act. The Bill states in Section 2 (2) that "the committee of management may charge such patients for accommodation, *medical or surgical attendance, and treatment.*" The obvious interpretation many give to these words is that the board of management will be able to contract *with a would-be patient* to provide all medical and surgical attendance and treatment required. To carry out such a proposal the board would contract with certain doctors; the doctors the board would contract with would be the members of the honorary visiting staff, *as their credentials have been approved*, and under this safeguard an action at law would be rendered almost impossible on behalf of a patient dissatisfied with the treatment given. It would be useful if Dr. Peter Macdonald would name the number of hospitals which at present have such an arrangement, as he seems to suggest that such hospitals exist. If that position became universal under law, then outside London all consultants and specialists not on the staff of a hospital would not expect to be contracted with; and as for general practitioners, the necessary general practitioner treatment—often the only medical necessity—would be given by consultants and specialists.

What the greater majority of the medical profession ask for is free choice of consultant, specialist, and general practitioner *made by the patient*, at his risk alone, the board of management providing only accommodation and maintenance (which includes the services of resident house-surgeons and house-physicians). We want no closed field for practice at a hospital by a group of part-time medical practitioners; in fact, we ask for the position as it now exists in a nursing home.

If the Bill is amended along these lines, then no one could object to its passage so far as that subject is concerned. As it stands at present our anxiety is justified.—I am, etc.,

Hove, May 6th. E. ROWLAND FOTHERGILL.

SIR,—I regret that Dr. Macdonald's reply in the *Supplement* of May 4th, while it deals with the scope of this Bill, fails to deal with the point raised in my previous letter (*Supplement*, April 27th). Provident associations and pay beds in themselves may be admirable institutions; the combination of the two is likely to react unfavourably on the general practitioner unless he is allowed access to his own patients.

It is reassuring to have Dr. Macdonald's statement that he has repeatedly urged that there should be such facilities for the general practitioner to treat his patients in hospital. But surely the difficulties of "convincing committees of management of hospitals and . . . hospital staffs" on this point are vastly increased when the joint effect of this Bill and the provident association will be to render hospitals quite independent of the general practitioner in the area.—I am, etc.,

London, W.10, May 11th. A. KEITH GIBSON.

Association Notices

TABLE OF OFFICIAL DATES

June 1, Sat.	Publication in *B.M.J. Supplement* of result of election of Members of Council by grouped Branches, and result of election of Members of Council and representatives in Representative Body by Public Health Service members. Nomination Papers available (on application at Head Office) for election of 12 Members of Council by grouped Representatives (British Isles).
June 5, Wed.	Council.
June 6, Thurs.	Names of Representatives and Deputy Representatives must be received at Head Office by this date.
June 22, Sat.	Publication of Supplementary Report of Council in *B.M.J. Supplement*.
July 3, Wed.	Other items for inclusion in A.R.M. printed Agenda must be received at Head Office by this date.
July 18, Thurs.	Conference of Honorary Secretaries, London.
July 19, Fri.	Annual Representative Meeting, London.
July 20, Sat.	Annual Representative Meeting, London.
July 22, Mon.	Annual Representative Meeting, London. Council.
July 23, Tues.	Annual Representative Meeting; Annual (Business) General Meeting; London. Council.
Sept. 10, Tues.	Adjourned Annual General Meeting; President's Address; Melbourne.
Sept. 11, Wed.	Meetings of Sections, etc., Melbourne.
Sept. 12, Thurs.	Meetings of Sections, etc., Melbourne. Annual Dinner of the Association, Melbourne.
Sept. 13, Fri.	Meetings of Sections, etc., Melbourne.

BRANCH AND DIVISION MEETINGS TO BE HELD

BATH, BRISTOL, AND SOMERSET BRANCH: WEST SOMERSET DIVISION.—At Taunton and Somerset Hospital, Tuesday, May 21st, 3.30 p.m. Election of representatives and deputy representative to Annual Representative Meeting. Consideration of Annual Report of Council.

DERBYSHIRE BRANCH.—At Rockside Hydro, Matlock, Wednesday, July 3rd. Annual general meeting. Competition for Derbyshire Golf Cup.

DERBYSHIRE BRANCH: BUXTON DIVISION.—Visit to Shropshire Orthopaedic Hospital, Oswestry, Saturday, June 1st. 10.45 a.m., Party meets at Devonshire Royal Hospital, Buxton; 11.15 a.m., leave for Ellesmere; 1 p.m., lunch at The Boat House, Ellesmere; 2.15 p.m., arrive at Shropshire Orthopaedic Hospital; 2.30 p.m., demonstration of cases by Mr. Harry Platt, and inspection of hospital; 4 p.m., tea. Applications to join the party should reach the honorary secretary of the Division, Dr. L. S. Potter, 18, Broad Walk, Buxton, by May 22nd.

DERBYSHIRE BRANCH: CHESTERFIELD DIVISION.—At Maternity Home, Chesterfield, Friday, May 24th, 8.30 p.m. Clinical meeting.

GLASGOW AND WEST OF SCOTLAND BRANCH.—At Stobhill Hospital, Springburn, Wednesday, May 22nd, 3 p.m. Clinical demonstration by members of hospital staff.

KENT BRANCH.—At Canterbury, Thursday, June 27th. Annual meeting. Luncheon at 1.15 p.m. Short afternoon service in Canterbury Cathedral at which academic dress will be worn.

LANCASHIRE AND CHESHIRE BRANCH: PRESTON DIVISION.—At Public Assistance Committee's Offices, Overseers' Buildings, Lancaster Road, Preston, Tuesday, May 21st, 4.30 p.m. Annual general meeting. Election of officers, etc. Consideration of Annual Report of Council.

LANCASHIRE AND CHESHIRE BRANCH: SOUTHPORT DIVISION.—At 52, Hoghton Street, Southport, Friday, May 24th, 8.30 p.m. Annual meeting.

METROPOLITAN COUNTIES BRANCH: CITY DIVISION.—At Chigwell Golf Course, Sunday, May 26th. Afternoon golf competition.

METROPOLITAN COUNTIES BRANCH: LEWISHAM DIVISION.—At Catford Town Hall, Tuesday, May 21st, 8.45 p.m. Annual general meeting.

MIDLAND BRANCH: LEICESTER AND RUTLAND DIVISION.—Thursday, May 23rd. Visit to Messrs. Cadbury's factory at Bournville.

NORTHERN COUNTIES OF SCOTLAND BRANCH: BANFF, MORAY, AND NAIRN DIVISION.—At Gray's Hospital, Elgin, Tuesday, May 21st, 3.30 p.m. Annual meeting. Election of officers, etc. Consideration of Annual Report of Council.

SOUTHERN BRANCH.—Annual meeting in Jersey. Friday, May 24th, 1 p.m., aeroplane leaves Southampton Airport; 2.15 p.m., arrives Jersey; 11.45 p.m., boat leaves Southampton Docks, arrives Jersey 9.15 next morning. Saturday, May 25th, morning visit to Société Jersiaise Museum; 1.30 p.m., council luncheon at Grand Hotel at invitation of Colonel P. J. Marett. At Jersey General Hospital: 2.45 p.m., Branch Council meeting; 3.30 p.m., annual meeting; 3.45 p.m., address on "Practical Public Health" by Colonel Marett, the incoming president; 4.30 p.m., tea. Dinner-dance at Grand Hotel in evening. Sunday, May 26th, morning excursion to the Dolman of La Houge Bie and to Mont Orgueil Castle, lunch en route. Tea at Le Patrimoine. 5.30 p.m., leave Jersey by air; 6.45 p.m., arrive Southampton. Monday, May 27th. 7.30 a.m., leave Jersey by boat; 4.30 p.m., arrive Southampton. All functions, except the annual meeting, are open to members' ladies.

SOUTH-WESTERN BRANCH: PLYMOUTH DIVISION.—At Goodbody's Café, Plymouth, Tuesday, May 21st, 4.30 p.m. Election of officers, etc.

SURREY BRANCH: REIGATE DIVISION.—At East Surrey Hospital, Redhill, Wednesday, May 22nd, 4 p.m. Annual general meeting and clinical meeting.

British Medical Association

OFFICES, BRITISH MEDICAL ASSOCIATION HOUSE
TAVISTOCK SQUARE, W.C.1

Departments

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IRISH MEDICAL SECRETARY: 18, Kildare Street, Dublin. (Telegrams: Bacillus, Dublin. Tel.: 62550 Dublin.)

Diary of Central Meetings

MAY

17 Fri. Journal Committee, 2.30 p.m.
22 Wed. Osteopathy Committee, 11.30 a.m.
Finance Committee, 2.30 p.m.
23 Thurs. Nutrition Committee, 11.30 a.m.
24 Fri. **Consultants and Specialists Group Committee, 2.15 p.m.**
27 Mon. **Physical Education Committee, Training of Teachers Subcommittee, 2 p.m.**

JUNE

5 Wed. **Council**, 10 a.m.
12 Wed. Physical Education Committee, Foreign Subcommittee, 2.15 p.m.
27 Thurs. Physical Education Committee, Education Subcommittee, 2 p.m.

DIARY OF SOCIETIES AND LECTURES

ROYAL COLLEGE OF PHYSICIANS OF LONDON, Pall Mall East, S.W.—*Tues.*, 5 p.m. Croonian Lecture by Sir Edmund Spriggs: A Clinical Study of Headaches.

ROYAL SOCIETY OF MEDICINE

Special Meeting of Fellows, Tues., 5 p.m. Nomination of Officers and Council for 1935–6.
General Meeting of Fellows, Tues., 5.30 p.m. Ballot for Election to the Fellowship.
Section of Comparative Medicine.—Wed., 5 p.m., Laboratory Meeting at Royal Army Medical College, Grosvenor Road, S.W. Annual General Meeting. Election of Officers and Council for 1935–6.
Section of Urology.—Thurs., 8.30 p.m. Annual General Meeting. Election of Officers and Council for 1935–6. Discussion: Scope and Indications for Renal Sympathectomy. Opener: Mr. S. Harry Harris (Sydney).
Section of Disease in Children.—Fri., 5 p.m. (Cases at 4.30 p.m.) Annual General Meeting. Election of Officers and Council for 1935–6. Cases by Dr. Raymond Kirk (for Dr. G. Bray), Dr. John Gibbens, Dr. Branford Morgan, and Dr. R. Bailey (for Dr. Donald Paterson). Other cases will be shown.
Section of Epidemiology and State Medicine.—Fri., 8 p.m. Annual General Meeting. Election of Officers and Council for 1935–6. Paper by Dr. Gordon Pickles: Epidemiology in Country Practice.

CHELSEA CLINICAL SOCIETY.—At Hotel Rembrandt, Thurloe Place, S.W., *Tues.* Discussion: Sex Problems in Practice. To be opened by Professor Culpin. Preceded by dinner at 7.30 p.m.
INSTITUTE OF MEDICAL PSYCHOLOGY, Malet Place, W.C.—*Wed.*, 3 p.m., Dr. H. Crichton-Miller, Hysteria; 4.30 p.m., Dr. Cedric Shaw, Cardiovascular Syndromes.
MEDICO-LEGAL SOCIETY, 11, Chandos Street, W.—*Thurs.*, 8.30 p.m. Dr. T. H. Blench: A Police Surgeon's Problems.

ST. JOHN'S HOSPITAL DERMATOLOGICAL SOCIETY, St. John's Hospital, 49, Leicester Square, W.C.—*Wed.*, 4.15 p.m., Annual General Meeting. 4.30 p.m., Clinical Cases.

POST-GRADUATE COURSES AND LECTURES

FELLOWSHIP OF MEDICINE AND POST-GRADUATE MEDICAL ASSOCIATION, 1, Wimpole Street, W.—*Maudsley Hospital,* Denmark Hill, S.E.: Afternoon Course in Psychological Medicine. *St. John's Hospital,* Leicester Square, W.C.: Afternoon Course in Dermatology. *Gordon Hospital,* Vauxhall Bridge Road, S.E.: All-day Course in Proctology. *City of London Maternity Hospital,* City Road, E.C.: Week-end Course in Obstetrics. *Panel of Teachers:* Individual clinics in various branches of medicine and surgery are available daily. Courses, etc., arranged by the Fellowship are open only to members and associates, with the exception of the Dermatology course.

CENTRAL LONDON THROAT, NOSE AND EAR HOSPITAL, Gray's Inn Road, W.C.—*Daily,* Intensive Course

HOSPITAL FOR EPILEPSY AND PARALYSIS, Maida Vale, W.—*Thurs.*, 3 p.m., Clinical Meeting. Demonstration by Dr. Douglas McAlpine.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—*Thurs.*, 2 p.m., Clinical Lecture, Dr. B. E. Schlesinger, Endocrine Disorders; 3 p.m., Pathological Demonstration, Dr. D. N. Nabarro, Meningitis—Treatment. Out-patient Clinics, mornings, 10 a.m. to 12 noon. Ward Visits, afternoons, 2 p.m. to 3.30 p.m. (except Wednesday).

INSTITUTE OF PATHOLOGY AND RESEARCH, St. Mary's Hospital, W.—*Thurs.*, 5 p.m. Dr. C. H. Andrewes: The Cancer Problem—Some Fresh Clues

LONDON SCHOOL OF HYGIENE AND TROPICAL MEDICINE, Keppel Street, W.C.—*Mon.*, 5.30 p.m., Professor Major Greenwood, Temperaments, Physical and Psychological, in Modern Science.

LONDON SCHOOL OF DERMATOLOGY, St. John's Hospital, 49, Leicester Square, W.C.—*Mon.*, 5 p.m., Dr. H. D. Haldin-Davis, Drug Eruptions. *Tues.*, 5 p.m., Dr. J. E. M. Wigley, Napkin Area Eruptions. *Thurs.*, 5 p.m., Dr. A. C. Roxburgh, Differential Diagnosis of Some Common Skin Diseases. *Fri.*, 5 p.m., Dr. W. J. O'Donovan, Tuberculosis of the Skin.

UNIVERSITY COLLEGE, Gower Street, W.C.—*Mon.*, 5 p.m., Dr. D. H. K. Lee, Physiological Effects of Tropical Climate. *Tues.*, 5.30 p.m., Professor C. J. Sisson, Sir Thomas Browne and his *Religio Medici.*

UNIVERSITY COLLEGE HOSPITAL MEDICAL SCHOOL, University Street, W.C.—*Mon.*, 5.15 p.m., Professor Charles Singer, Recent Additions to the History of Syphilis.

WEST LONDON HOSPITAL POST-GRADUATE COLLEGE, Hammersmith, W.—*Daily,* 2 p.m., Operations, Medical and Surgical Clinics. *Mon.*, 10 a.m., Medical Wards; 11 a.m., Surgical Wards; 2 p.m., Gynaecological and Surgical Wards, Eye and Gynaecological Clinics. *Tues.*, 10 a.m., Medical Wards; 11 a.m., Surgical Wards; 2 p.m., Throat Clinic; 4.15 p.m., Lecture, Dr. Redvers Ironside, Coma. *Wed.*, 10 a.m., Medical Wards, Children's Clinic and Wards; 2 p.m., Gynaecological Operations and Eye Clinic. *Thurs.*, 10 a.m., Neurological and Gynaecological Clinics; 12 noon, Fracture Demonstration; 2 p.m., Genito-urinary and Eye Clinics; 3.45 p.m., Venereal Diseases. *Fri.*, 10 a.m., Skin Clinic; 12 noon, Lecture on Treatment; 2 p.m., Throat Clinic; 4.15 p.m., Lecture, Mr. Roche, Urethral Stricture. *Sat.*, 10 a.m., Medical Wards, Children's and Surgical Clinics. The lectures at 4.15 p.m. are open to all medical practitioners without fee.

ABERDEEN MEDICAL SCHOOL.—At Aberdeen Royal Infirmary: *Tues.* and *Thurs.*, 3.15 p.m., Dr. A. Greig Anderson and Professor J. R. Learmonth, Peptic Ulcer.

DUNDEE ROYAL INFIRMARY.—*Thurs.*, 3.15 p.m., Dr. J. Thomson, Clinical Cases of Diseases in Children; Dr. W. L. Kinnear, Treatment of Some Pulmonary Affections in Children.

GLASGOW POST-GRADUATE MEDICAL ASSOCIATION.—At Royal Infirmary: *Wed.*, 4.15 p.m., Dr. David Smith, Medical Cases.

LIVERPOOL UNIVERSITY CLINICAL SCHOOL ANTE-NATAL CLINICS.—Royal Infirmary: *Mon.* and *Thurs.*, 10.30 a.m. Maternity Hospital: *Mon.*, *Tues.*, *Wed.*, *Thurs.*, and *Fri.*, 11.30 a.m.

MANCHESTER ROYAL INFIRMARY.—*Tues.*, 4.15 p.m., Dr. N. Kletz, Constipation. *Fri.*, 4.15 p.m., Dr. J. Wharton, Demonstration of Ophthalmic Cases.

NEWCASTLE GENERAL HOSPITAL.—*Sun.*, Dr. F. J. Nattrass, Medical Ward Visit.

VACANCIES

All advertisements should be addressed to the Financial Secretary and Business Manager and NOT to the Editor.

ABERDEEN ROYAL INFIRMARY.—Two vacancies in the office of Clinical Tutor (Honorary)
BARNSTAPLE: NORTH DEVON INFIRMARY.—R.M.O. Salary £150 p.a.
BARROW-IN-FURNESS: NORTH LONSDALE HOSPITAL.—R.C.O. (male). Salary £150 p.a.
BATH: ROYAL UNITED HOSPITAL.—Out-patient and C.O. (male, unmarried). Salary £150 p.a.
BEDFORD COUNTY HOSPITAL.—(1) First H.S. (2) Second H.S. Males, unmarried. Salaries £155 and £150, respectively.
BOLTON ROYAL INFIRMARY.—Two H.S. Salaries £125 p.a. each.
BURY INFIRMARY, LANCS.—Third H.S. (male). Salary £150 p.a.
BUXTON: DEVONSHIRE ROYAL HOSPITAL.—(1) H.P. (2) Assistant H.P. Males. Salaries £200 and £150-£175 p.a., respectively.
CANTERBURY: KENT AND CANTERBURY HOSPITAL.—Two H.S's. (males, unmarried). Salaries £125 p.a. each.

CARDIFF: WELSH NATIONAL SCHOOL OF MEDICINE.—Junior Assistant in the Medical Unit. Salary £250 p.a.

CHARING CROSS HOSPITAL, W.C.—Assistant P. (male).

CHELSEA HOSPITAL FOR WOMEN, Arthur Street, S.W.—J.H.S. (male). Salary £100 p.a.

CITY OF LONDON HOSPITAL FOR DISEASES OF THE HEART AND LUNGS, Victoria Park, E.—H.P. (male). Salary £100 p.a.

DARLINGTON MEMORIAL HOSPITAL.—H.S. (male) for the Casualty and Out-patient Department. Salary £150 p.a.

DERBY CITY HOSPITAL.—Fourth R.M.O. (male). Salary £120 p.a.

DEVON COUNTY COUNCIL.—Assistant County M.O. Salary £500-£25-£700 p.a.

EALING BOROUGH.—A.M.O. (female) for Maternity and Child Welfare Services. Salary £450-£25-£550 p.a.

ELIZABETH GARRETT ANDERSON HOSPITAL, Euston Road, N.W.—(1) H.P. (2) Three H.S. (3) Obstetric Assistant. Salaries £50 p.a. (4) Clinical Assistant to the Ear, Nose, and Throat Department. Females.

FRODSHAM: LIVERPOOL SANATORIUM.—Second Assistant (male, unmarried). Salary £200 p.a.

GRIMSBY COUNTY BOROUGH.—R.M.O. (male, unmarried) at the Grimsby Corporation Hospital. Salary £350-£25-£450 p.a.

HARTLEPOOLS HOSPITAL.—H.S. Salary £150 p.a.

HASTINGS: ROYAL EAST SUSSEX HOSPITAL.—J.H.S. Salary £150 p.a.

HORTON GENERAL HOSPITAL.—R.M.O. Salary £150 p.a.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton, S.W.—Whole-time Assistant in the Pathology Department. Salary £350 p.a.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—(1) H.P. (2) H.S. Males, unmarried. Salaries £100 p.a. each.

HULL ROYAL INFIRMARY.—C.O. (male). Salary £150 p.a.

ILFORD: KING GEORGE HOSPITAL.—(1) R.S.O. (2) Resident Assistant S.O. and C.O. (3) Two H.P. (4) Three H.S. Salaries £300 p.a., £250 p.a., £100 p.a., and £100 p.a., respectively.

IRAQ GOVERNMENT.—(1) Surgeon Specialist. (2) Surgeon. Specialist in Ear, Nose, and Throat Diseases. (3) Ophthalmic Surgeon. (4) Physician on Children's Diseases. (5) Professor of Materia Medica, Pharmacology, and Therapeutics. (6) Professor of Physiology. Salaries £100 to £120 per mensem according to qualifications.

LANCASTER: COUNTY MENTAL HOSPITAL.—A.M.O. (unmarried). Salary £500-£25-£600 p.a.

LINCOLN COUNTY HOSPITAL.—J.H.S. (male, unmarried). Salary £150-£200 p.a.

LINDSEY (LINCOLNSHIRE) COUNTY COUNCIL.—R.M.O. at Branston Hall County Sanatorium and Assistant County M.O.H. Salary £650-£25-£700 p.a.

LIVERPOOL STANLEY HOSPITAL.—Surgical Registrar. Salary £50 p.a.

LONDON LOCK HOSPITAL, Harrow Road, W.—Surgical Registrar to the Female Lock Hospital. Honorarium £100 p.a.

MANCHESTER CITY.—J.A.M.O. (unmarried, Grade III) at Withington Hospital and Institution. Salary £200 p.a.

MANCHESTER ROYAL INFIRMARY.—M.O. to Out-patients. Salary £35.

MANCHESTER AND SALFORD HOSPITAL FOR SKIN DISEASES.—(1) Two A.M.O's. (2) H.S. Salaries £100 p.a. each.

MEXBOROUGH: MONTAGU HOSPITAL.—J.H.S. (female). Salary £100 p.a.

MIDDLESBROUGH: NORTH RIDING INFIRMARY.—Third H.S. (male, unmarried). Salary £125 p.a.

MILLER GENERAL HOSPITAL, Greenwich Road, S.E.—(1) H.P. (2) H.S. (3) Two C.O's. (part-time). (4) Out-patient Officer (part-time). Males, unmarried. Salaries £100, £100, £150, and £150 p.a., respectively.

NEWCASTLE-UPON-TYNE EYE HOSPITAL.—J.R.H.S. Salary £150 p.a.

NEWCASTLE-UPON-TYNE: ROYAL VICTORIA INFIRMARY AND UNIVERSITY OF DURHAM COLLEGE OF MEDICINE.—Temporary Assistant in the Pathological Department. Salary £400-£600 p.a.

NOTTINGHAM CITY MENTAL HOSPITAL.—Locumtenent M.O. (male, unmarried). Salary £7 7s. per week.

OXFORD: WINGFIELD-MORRIS ORTHOPAEDIC HOSPITAL.—H.S. (male). Salary £100 p.a.

PETERBOROUGH AND DISTRICT MEMORIAL HOSPITAL.—R.H.P. (male). Salary £135 p.a.

QUEEN MARY'S HOSPITAL FOR THE EAST END, E.—(1) R.M.O. (2) Two C.O's. and Out-patient Officers. Salaries £150 p.a. each. (3) Two H.S. (4) H.P. (5) Obstetric H.S. (6) Resident Anaesthetist and H.P. Salaries £120 p.a. each. Males, unmarried.

QUEEN'S HOSPITAL FOR CHILDREN, Hackney Road, E.—(1) H.P. (2) C.O. Salaries £100 p.a. each.

PLYMOUTH: PRINCE OF WALES'S HOSPITAL.—(1) H.S. (2) R.S.O. (male). (3) H.P. and C.O. Salaries £120, £200, and £100 p.a., respectively.

RADIUM INSTITUTE, Riding House Street, W.—H.S. (unmarried). Salary £150 p.a.

READING: ROYAL BERKSHIRE HOSPITAL.—(1) H.S. to Ophthalmic, and Ear, Nose, and Throat Departments. Salary £125 p.a. (2) Assistant Hon. S.

RHONDDA URBAN DISTRICT COUNCIL.—(1) Senior A.M.O. for Maternity and Child Welfare Work. Salary £700-£25-£750 p.a. (2) Temporary A.M.O. Salary £10 per week. Females.

ROYAL FREE HOSPITAL, Gray's Inn Road, W.C.—(1) R.C.O. (male). Salary £150 p.a. (2) First H.S. (3) Resident Anaesthetist. Males. (4) Non-resident First Assistant in the Children's Department. Salary £115 p.a.

ROYAL WATERLOO HOSPITAL FOR CHILDREN AND WOMEN, Waterloo Road, S.E.—(1) C.O. (2) H.S. Males. Salaries £200 p.a. and £100 p.a., respectively.

RYDE: ROYAL ISLE OF WIGHT COUNTY HOSPITAL.—R.H.S. (unmarried). Salary £180 p.a.

SHEFFIELD CITY.—J.A.M.O. (male) at City General Hospital. Salary £200 p.a.

SHEFFIELD ROYAL HOSPITAL.—(1) H.P. (2) Resident Anaesthetist and Assistant H.P. Salaries £80-£100 p.a. each. (3) Whole-time non-resident Clinical Assistant to the Ear, Nose, and Throat Department. Salary £300 p.a.

SHEFFIELD: ROYAL INFIRMARY.—H.P. Salary £80-£100 p.a.

SHEFFIELD: ROYAL INFIRMARY AND ROYAL HOSPITAL.—Non-resident Clinical Assistant to the Radiological Departments. Salary £300 p.a.

SHEFFIELD UNIVERSITY.—Assistant Pathologist to the Royal Hospital, Sheffield, and Demonstrator of Pathology in the University. Salary £500 p.a.

SOUTH LONDON HOSPITAL FOR WOMEN, Clapham Common, S.W.—(1) H.P. (2) H.S. Females. Salaries £100 p.a. each.

SOUTH SHIELDS: INGHAM INFIRMARY.—(1) Senior H.S. (2) J.H.S. Males. Salaries £200 and £150 p.a., respectively.

SOUTHEND-ON-SEA GENERAL HOSPITAL.—(1) Surgical Registrar. (2) Medical Registrar. (3) C.O. (male). Salaries £[illegible], £300, and £100 p.a., respectively.

STOKE-ON-TRENT: BURSLEM, HAYWOOD, AND TUNSTALL WAR MEMORIAL HOSPITAL.—J.M.O. (male). Salary £150 p.a.

STOKE-ON-TRENT: LONGTON HOSPITAL.—H.S. (male). Salary £160 p.a.

STRAITS SETTLEMENTS GOVERNMENT.—Dental Officer and Lecturer in Dental Mechanics for the King Edward VII College of Medicine, Singapore. Salary £700-£35-£1,120 p.a.

TRURO: ROYAL CORNWALL INFIRMARY.—H.S. (male). Salary £170 p.a.

UNIVERSITY COLLEGE HOSPITAL, Gower Street, W.C.—Hon. Assistant P.

UNIVERSITY OF LONDON, South Kensington, S.W.—(1) Geoffrey Duveen Travelling Studentship for Research in Oto-rhino-laryngology. Salary £450 p.a. (2) Laura de Saliceto Studentship for the Advancement of Cancer Research. Salary £150 p.a.

WALTHAMSTOW EDUCATION COMMITTEE.—Full-time Assistant Dental S. Salary £450 p.a.

WEST END HOSPITAL FOR NERVOUS DISEASES, Gloucester Gate, N.W.—Hon. Anaesthetist.

WINDSOR: KING EDWARD VII HOSPITAL.—R.M.O. Salary £150 p.a.

WOLVERHAMPTON: ROYAL HOSPITAL.—H.S. (unmarried). Salary £100 p.a.

WOOLWICH AND DISTRICT WAR MEMORIAL HOSPITAL, Shooters Hill, S.E.—(1) H.P. (2) H.S. Males. Honoraria £100 p.a. each.

WORCESTER CITY AND COUNTY.—(1) A.M.O. (male). (2) A.M.O. Salaries £500-£700 p.a. each.

YORK CITY.—(1) Senior Assistant School M.O. (male). (2) Assistant School M.O. (female). (3) Temporary A.M.O. Salaries £500-£25-£700 p.a. each. (4) Temporary R.M.O. Salary £250 p.a.

CERTIFYING FACTORY SURGEONS.—The following vacant appointments are announced: Lowestoft (Suffolk), Loughborough (Leicestershire). Applications to the Chief Inspector of Factories, Home Office, Whitehall, S.W.1, by May 28th.

APPOINTMENTS

AITCHISON, R. C., M.B., Ch.B., Medical Referee under the Workmen's Compensation Act, 1925, for the Selkirk Sheriff Court District (Sheriffdom of Roxburgh, Berwick, and Selkirk).

ORD, J. W., M.D., C.M., Honorary Anaesthetist, Willesden General Hospital.

PIM, D. C., D.S.O., M.D.Dub., Certifying Factory Surgeon for the Abergavenny District (Monmouthshire).

LONDON COUNTY COUNCIL.—The following appointments have been made at the hospitals indicated in parentheses. *Senior Assistant Medical Officers, Grade I:* J. Owen Reid, M.D., B.Ch. (St. George-in-the-East); W. Leslie, M.B., B.S., F.R.C.S. (St. Luke's Hospital, Chelsea). *Senior Assistant Medical Officers, Grade II:* W. Simpson, M.D. (St. Alfege's); F. D. Murphy, M.B., B.Ch., B.A.O. (Paddington); W. H. Graham, M.B., Ch.B.Glas., F.R.C.S. (St. Mary Islington). *Assistant Medical Officers, Grade I:* W. I. Bain, B.Ch., M.R.C.S., L.R.C.P., and Margaret H. Scott, M.B., B.S. (Queen Mary's Hospital for Children); J. Hughes, B.Ch., M.R.C.S., L.R.C.P. (The Downs Hospital for Children); S. C. Colbeck, M.B., Ch.B. (Grove Park); P. T. Cooper, M.B., B.Ch. (St. Pancras); K. R. Cussen, M.B., B.S. (St. Luke's Hospital, Lowestoft); A. N. Jones, M.B., Ch.B., F.R.C.S. (Bethnal Green); H. J. Goldring, M.B., Ch.B. (Lambeth); D. B. Smith, M.D., and A. M. Douglas, M.B., Ch.B. (St. Stephen's); A. A. Cunningham, M.B., B.Ch. (South-Eastern). *Assistant Medical Officers, Grade II:* J. S. Robson, M.B., B.Ch. (Constance Road Institution); S. C. S. Cooke, M.R.C.S., L.R.C.P. (Dulwich); A. C. Stevenson, M.B., Ch.B. (Highgate); G. A. Buggle, L.R.C.P. and S.I. (Holborn and Finsbury Institution); Athel M. Sayce, M.B., Ch.B. (Paddington); M. E. Disney, M.B., B.S. (Queen Mary's, Sidcup); Jane Druker, M.B., Ch.B. (St. Benedict's). *House-Surgeons:* R. D. Bruce, M.B., Ch.B. (Hackney); W. A. Carey, M.R.C.S., L.R.C.P. (St. Giles); W. A. Johnson, M.R.C.S., L.R.C.P. (St. James). *House-Physicians:* H. B. D. Kettlewell, M.R.C.S., L.R.C.P. (Hackney); T. E. Caffell, M.B., Ch.B. (St. Alfege's); G. A. Barker, M.R.C.S., L.R.C.P. (St. Giles); G. H. C. Ovens, M.R.C.S., L.R.C.P., and D. A. B. Hopkin, M.R.C.S., L.R.C.P. (St. James). *Clinical Assistant:* Gladys A. R. Lenanton, M.R.C.S., L.R.C.P. (St. Mary Abbots).

WOOLWICH AND DISTRICT HOSPITAL ASSOCIATION, Shooters Hill, S.E.—*Honorary Laryngologist:* A. J. Wilson Chamings, F.R.C.S. *Surgical Registrar:* Geoffrey E. Parker, F.R.C.S.

BIRTHS, MARRIAGES, AND DEATHS

The charge for inserting announcements of Births, Marriages, and Deaths is 9s., which sum should be forwarded with the notice not later than the first post on Tuesday morning, in order to ensure insertion in the current issue.

BIRTH

EVANS.—On May 12th, at 20, Devonshire Place, W.1, to Muriel Gordon Evans, M.D., F.R.C.S.Ed., wife of E. Stanley Evans, F.R.C.S., of Heatherwood, Ascot, a son.

MARRIAGE

TWEED—HOGGE.—On May 2nd, 1935, at St. Matthew's, Ealing, by the Rev. A. F. W. Thomas, James G. Tweed, M.B., B.Ch.Bel., elder son of the late Mr. and Mrs. James Tweed, Ballymoney, Northern Ireland, to Betty Josephine, younger daughter of the late Colonel G. S. Hogge and Mrs. Hogge of 65A, Madeley Road, Ealing, W.5.

DEATH

CHEVES.—On May 12th, 1935, at Dahinda, Anderton, Plymouth, James Trelawny Cheves, M.R.C.S., L.S.A., aged 74.

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